03/15/2014 09:18

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48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

NAME OF COMMITTEE IN FULL For Congress]	
Enyart for Congress ADDRESS (number and street) PO Box 308				
ADDRESS (number and street) PO Box 308				
CITY, STATE, and ZIP CODE			-	
Belleville	IL 6222	22		
2. NAME OF CANDIDATE	3. OFFICE SOUGHT (State and District)		4. FEC IDENTIFICATIO	N NUMBER
William L. Enyart Jr.	House IL 12		C00523258	
5. IS THIS AN AMENDMENT? NO, THIS IS A NEW FILING	YES, IT AMENDS THE	NOTICE FILED ON	/	/
A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer		Date (month,	Amount
AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THERAPY POLITICAL ACTION COMMITTEE (PT-PAC)			day, year) 03/14/2014	1000.00
1111 NORTH FAIRFAX ST.			03/14/2014	1000.00
	Transaction ID : C5440757			
ALEXANDRIA VA 22314	Occupation			
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer		Date (month,	Amount
David A. Miller	W A Schickedanz Agency, Inc.		day, year)	
	, and the second	.geey,e.	03/14/2014	1000.00
111 Bluff Dr	Transaction ID 05440750			
	Transaction ID : C5440756		-	
Belleville IL 62223-1201	Occupation Vice President			
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer		Date (month, day, year)	Amount
	Occupation		-	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer		Date (month,	Amount
			day, year)	
	Occupation		-	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation		Date (month, day, year)	Amount
SIGNATURE (optional) Brent Gaines	[Electronically Filed]		For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100	

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